

ZILKA-KOTAB

PC
ZILKA, KOTAB & FEECE™95 SOUTH MARKET ST., SUITE 420
SAN JOSE, CA 95113TELEPHONE (408) 971-2573
FAX (408) 971-4660RECEIVED
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FAX COVER SHEET

Date: October 21, 2004	Phone Number	Fax Number
To: Examiner Thai Q. Phan		(703) 872-9306
From: Kevin J. Zilka		

Docket No.: NAIIP268/99.081.01

App. No: 09/586,671

Total Number of Pages Being Transmitted, Including Cover Sheet: 19

Message:

Please deliver to Examiner Phan.

Thank you,

Kevin J. Zilka

☐ Original to follow Via Regular Mail ☒ Original will Not be Sent ☐ Original will follow Via Overnight Courier

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AT (408) 971-2573 AT YOUR EARLIEST CONVENIENCE

October 21, 2004

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

PATENT

In re application of:

Muttik et al.

Application No. 09/586,671

Filed: June 1, 2000

For: DETECTING COMPUTER VIRUSES OR
MALICIOUS SOFTWARE BY PATCHING
INSTRUCTIONS INTO AN EMULATOR

Group Art Unit: 2128

Examiner: Phan, Thai Q.

Date: October 21, 2004

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CERTIFICATE OF FACSIMILE

I hereby certify that this correspondence is being facsimile transmitted to the
Commissioner for Patents, Alexandria, VA 22313-1450 at facsimile number: (703)
872-9306 on October 21, 2004.

Signed:

Erica L. Farlow

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated as shown below.

	Claims Remaining After Amendment	Highest Previously Paid For	Present Extra	SMALL ENTITY RATE FEE	OR	LARGE ENTITY RATE FEE
TOTAL CLAIMS	37 -	36	01	X09 = \$	OR	X18 = \$18
INDEP CLAIMS	03 -	03	00	X44 = \$	OR	X88 = \$0
[] Multiple Dependent Claim Present and Fee Not Previously Paid				\$0		\$0
TOTAL				\$		\$18.00

- ☐ Applicant(s) hereby petition for a month extension of time to respond to the outstanding Office Action.
- ☒ Applicant(s) believe that no Extension of Time is required; however, if it is determined that such an extension is required, Applicant(s) hereby petition that such an extension be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 50-1351 (Order No. NA11P268).
- ☐ Enclosed is our Check No. in the amount of \$ to cover the additional claim fee and/or extension of time fees. If the required fees are missing or any additional fees are required to facilitate filing the enclosed response, please charge such fees or credit any overpayment to Deposit Account No. 50-1351 (Order No. NA11P268). A copy of this sheet is enclosed for billing purposes.

Respectfully submitted,
Zilka-Kotab, PC

Kevin J. Zilka
Registration No. 41,429

P.O. Box 721120
San Jose, CA 95172-1120
Telephone: (408) 971-2573

(Revised 1/96)

